

(Print Name of lobbyist)

# STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

# RECEIVED

SEP 0 4 2018

NEW HAMPSHIRE PARTMENT OF STATE

I Nama of Labbuigger Jul	dy A. Silva, Cordell A. Joh	nston, Barbara T. Reid, Ti	imothy W. Fortier
I. Name of Lobbyist(s)	<u> </u>		
•	nership, firm or corporation, i	•	
	Municipal Association	on	
(Name of p	artnership, firm or corporation)		
25 Triangle Park Drive	Conco	rd NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
( ) 603.224.744	<u>/ ( )</u>	e-maii	ntalaffairs@nhmunicipal.org
(Telephone)	(F	cax)	
□ All reportable transaction	(Choose one – file separate reptions which are not attributable occurring in the months prior Municipal Association	le to any one client).  to the reporting date relative to	
	Name of Client as it appears on the		
<u>OR</u>			
☐ All reportable transaction unrelated to any particular cl	s by the lobbyist (including the lient.	lobbyist's family), or the lobbyi	ing firm listed below which are
	il 25, 2018 🛣	July 25, 2018 🗍	
	n date of registration to 3/31/18	activity from 4/1/18 to 6/30/	
	ober 31, 2018   from 7/1/18 to 9/30/18	January 30, 2019 ☐ activity from 10/1/18 to 12/.	
	ees received and no reportal tete just this form and submit it to		
VI. Check if additional rep	orts are attached:		
•	s or made expenditures, you mus	st file Addendum A- Fees and	Expenses
<ul> <li>If you have paid an hone Expense Reimbursement</li> </ul>	rarium or reimbursed expenses,	you must file Addendum B-F	Report of Honorariums or
☐ If you, your firm, or you	r family has made political conti	ributions, you must file Addenc	dum C- Political Contributions
Sworn Statement/Affirmation I have read RSA 15, RSA 15 and complete to the best of notice (Signature of lobbyist)	-B, RSA 14-C and RSA 664 and	August 27, 2	-

# STATE OF NEW HAMPSHIRE



#### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Judy A. Silva, Cordell A. Johnston, Barbara	T. Reid, Timothy W. Fortier
II. Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Municipal Association	
(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Municipal Associate	on Date August 27, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations services oss fee amount reported shall not be
a) Total of all fees received in this reporting period	a) \$ 42,797.11 b) \$ 0.0
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ 0.0 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 42,797.11
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$ 0.0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 42,797.11
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.0 c) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 42,797.11
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 0.0
f) Total of all expenses year to date	f) \$ 42,797.11
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
Judy Worthe	August 27, 2018
(Signature of lobbyist)	(Date)
Judy A. Silva U	
(Print Name of lobbyist)	

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

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#### Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Cordell A. Johnston  Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):				
April 25, 2018	July 25, 2018 🗆	October 31, 2018 🗆	January 30, 2019 □	
			nd Expenses described above, umber of Addendum forms b	
X Addendum A	(s).			
Addendum Be	(s).			
Addendum Co	s).			
	rm that the foregoing in fing the foregoing in final the firms of the		nt and each Addendum is true	and
On till a.	Llux	Aug	gust 27, 2018	
(Signature of lobbyist	) 0		(Date)	
Cordell A. Jo	hnston			
(Print Name of Johnyi	et)			

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# SEP 0 4 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

# Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Timothy W. Fortier				
Name of Client (leave blank if S particular client):	tatement is	for the partnership, firm, or	corporation and not related to an	
Date of Report (check one):				
April 25, 2018	5, 2018 🖶	October 31, 2018 🗆	January 30, 2019 □	
I have read RSA 15, RSA 15-B, the following Addendums subm submitted):				
Addendum A(s).				
Addendum B(s).				
Addendum C(s).				
I hereby swear or affirm that the complete to the best of my know			nt and each Addendum is true an	
July W R	 	Aug	gust 27, 2018	
(Signature of lobbyist)	<u>-</u>		(Date)	
Timothy W. Fortier				
(Print Name of lobbyist)		_ <del>_</del>		

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Timothy W. Fortier

(Print Name of lobbyist)

# RECEIVED

SEP 0 4 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying partnership, firm, or corporation: Timothy W. Fortier				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):				
Date of Report (check	( one):			
April 25, 2018	July 25, 2018 🛚	October 31, 2018 🗆	January 30, 2019 □	
			nd Expenses described above, umber of Addendum forms be	
X Addendum A	(s).			
Addendum B	(s).			
Addendum C	(s). <sub>\</sub>			
•	rm that the foregoing ir f my knowledge and be		nt and each Addendum is true	and
aught &		Au	gust 27, 2018	
(Signature of lobbyist	)		(Date)	